Case 3:11-cr-00159-D) Pocument 82 Filed 08/02/12 Page 1	e 1 of 8	THERN DISTRICT OF	T TRXAS
Case 3:11-cr-00159-D Document 82 Filed 08/02/12 Page 6A 5-1/CR/59-D		FILED	
FORM 6A. Supplemental in Forma Pauperis Form for Prisoners		AUG - 2 2012	7
		7,00 2,2012	
SUPPLEMENTAL IN FORMA PAUPERIS FORM F	OR <b>Œ</b> R		OURT
		Deputy/	
AUTHORIZATION FORM			
I, Larry Derek Blain, request and authorize the agent to send to the Clerk of the United States Court of Appeals for the Feder of the statement for the past six months of my trust fund account (or the institution where I am incarcerated. I further request and authorized custody to calculate and disburse funds from my trust fund account (in the amounts specified by 28 U.S.C. § 1915(b). This authorization with an appeal, and I understand that the total appellate filing fees for \$450 or \$455. I also understand that these fees will be debited from m outcome of my appeal. This authorization shall apply to any other agmay be transferred.	institution the agent or institution is furnish r which I y account	nal equivalent) at acy holding me in tional equivalent) ned in connection am obligated are a regardless of the	
Date  Petitioner's/Appella  You must sign and date above. You must also complete the following D the Declaration Under Penalty of Perjury below.			
DISCLOSURE OF PRIOR FEDERAL ACTIONS  If you are presently incarcerated, have you ever before brought an account while you were incarcerated or detained? Yes	ction or ap No	ppeal in a federal	
If so, how many times?			
Were any of the actions or appeals dismissed because they were frivol state a claim upon which relief may be granted? Yes		cious, or failed to	
If so, how many of them?			
DECLARATION UNDER PENALTY OF PERJURY			
I declare under penalty of perjury, under the laws of the United States and correct.	s, that the	foregoing is true	
Date Petitioner's/Appella	nt's Signa	ature	

FORM 6. Motion and Declaration for Leave to Proceed in Forma Pauperis

### UNITED STATES COURT OF APPEALS FOR THE FEDERAL CIRCUIT

UNITED STATES OF AMERIÇA v. LARRY DEREK BLAIN

 $N_{O.} 3:11-CR-159-D$ 

### Motion and Declaration for Leave to Proceed in Forma Pauperis

INSTRUCTIONS: If you do not pay the fee, file this completed form with your petition for review or notice of appeal within 14 days of the date of docketing. Complete all questions in this application and then sign it. Do not leave any blanks; if the answer to a question is "0", "none", or "not applicable "(N/A), write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case docket number, and the question number. Failure to fully answer the questions may result in a denial of the motion.

Petitioner/Appellant hereby moves for leave to proceed in forma pauperis, pursuant to 28 U.S.C. § 1915, in this case and submits the following declaration in support thereof:

I, Larry Derek Blain, am the Petitioner/Appellant in the above-entitled case. In support of my motion to proceed on appeal without being required to pay the docketing fee, I state that I am unable to pay the fee because of my poverty; that I believe that I am entitled to redress; and that the issues which I desire to present on appeal are the following: that the district court may have erred in enhancing my sentenced.

I further declare that the responses which I have made to the questions and instructions below relating to my ability to pay the docketing fee are true.

1. For both you and your spouse, estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	_	onthly amount past 12 months	Amount expected next month			
	You	Spouse	You	Spouse		
Employment	\$ <u> </u>	\$ N A	\$ <u> </u>	SNA		
Self-employment	\$0	\$ <u>H/A</u>	\$ <u> </u>	\$ N/A		
Income from real property (such as rental income)	\$0	\$ 1/A	\$ <u> </u>	\$_ 1/A_		

FORM 6. Motion and Declaration for Leave to Proceed in Forma Pauperis (continued)

			onthly amount past 12 months	Amount next mo	expected nth
	You	u	Spouse	You	Spouse
Interest and dividends	\$	0	\$ <u>N/A</u>	\$_ <b>o</b> _	\$ N/A
Gifts	\$	٥	\$ N/A	\$ <u> </u>	_ \$_N/A
Alimony	\$	0	\$_ N/A_	\$&_	\$ N/
Child support	\$	0	\$_N/A_	\$ <u>o</u>	_ \$_N/A
Retirement (such as social security, pensions, annuities, insurance)	\$	0	\$ <u>N/A</u>	\$ <u> </u>	_ \$_ <del>\</del>
Disability (such as social security, insurance payments)	\$	0	\$_N/A_	\$ <b>o</b>	\$N/4
Unemployment payments	\$	٥	\$ N/A	\$ <u> </u>	_ \$_ N/A
Public assistance (such as welfare)	\$		\$ <u> </u>	\$	\$
Other (specify)	\$	0	\$_N/A_	\$ <u> </u>	_ \$ <u> </u>
Total monthly income:	\$	0	\$_N/A_	\$ <u> </u>	_ \$_N/A
Employer Add	lress		Dates of employment		Fross monthly ay
	ay is pa	ay befo		eductions.) G	ost recent  Fross monthly ay
4. Are you presently inc tement certified by the appropr I balances during the last six m	riate ins ionths i	stitutior in your	ial officer showing	gall receipts ints. If you	s, expenditures have multiple

## FORM 6. Motion and Declaration for Leave to Proceed in Forma Pauperis (continued)

Below, state any money you nstitution. State the average	monthly balance.	Dalik acco	unts of in an	y other illianciai
Financial institution	Type of account	Amoun	ıt you have	Amount your spouse has
N/A		\$		
6. List the assets, a clothing and ordinary househ	nd their values, which yold furnishings.	you own o	r your spouse	owns. Do not list
Home (Value)	Other real estate	(Value)	Other asse	ets (Value)
	Motor vehicle #1 Make, model & year:  NA Value:		Motor veh Make, mod N A Value.	
	Registration #:	!	Registration	n #:
7. State every persone amount owed:	on, business, or organiza	ation owing	g you or you	r spouse money, and
Person, business or organization owing you or your spouse money	Amount owed to y	ou	Amount spouse	owed to your
N A			N	A

FORM 6. Motion and Declaration for Leave to Proceed in Forma Pauperis (continued)

Initials of Person	Relationship			Age	
9. Estimate the average moounts paid by your spouse. Adjuniannually, or annually to show the	onthly expenses of you and ast any payments that are he monthly rate.	d your f made v	amily. S veekly, b	how se	parately y, quarte
<b>.</b>		You		You	ır spou
Rent or home mortgage paymen		\$	0	_ \$	NA
(include lot rented for mobile ho	me)				·
Are real estate taxes inclu					
Is property insurance incl					
Utilities (electricity, heating fuel and telephone)	, water, sewer,	\$	0	_ \$	N A
Home maintenance (repairs and	upkeep)	\$	0	_ \$	N/A
Food		\$	٥	_ \$	NA
Clothing		\$	0	_ \$	4/4
Laundry and dry cleaning		\$	0	_ \$	N A
Medical and dental expenses		\$	0	_ \$	NIA
Transportation (not including mo	otor vehicle payments)	\$	٥	\$	N/A
Recreation, entertainment, newsp	papers, magazines, etc.	\$	٥	_ \$	NIA
Insurance (not deducted from wain mortgage payments)	iges or included				
Homeowner's or renter's		\$	0	_ \$	N/A
Life		\$	0	\$	NA
Health		\$	0	_ \$	n A
Motor vehicle		\$	0	_ \$	N/A
Other:	:	\$	0	_ \$	NIA
Taxes (not deducted from wages in mortgage payments) (specify)		\$	0	\$	al A

### Form 6

FORM 6. Motion and Declaration for Leave to Proceed in Forma Pauperis (continued)

	You	Your spous
Installment payments		·
Motor vehicle	\$	_ \$N/A
Credit card (name):	\$	\$ N/A
Department store (name):	\$	\$ N/A
Other:	\$	\$ N/A
Alimony, maintenance, and support paid to others	\$0	_ \$\d
Regular expenses for operation of business,	\$ <u> </u>	_ \$_ N/A
profession or farm (attach detailed statement)		<i>r</i>
Other (specify):	\$ <u> </u>	\$\
Total monthly expenses:	\$o	\$ N/A
sets or liabilities during the next 12 months?  Yes ✓No  If yes, describe on an attache  11. Have you paid, or will you be paying, an attorn		
11. Have you haid, or will you be naving an attorn		
nnection with this case, including the completion of this for	iey any money	for services in
infection with this case, including the completion of this fo	orm?	for services in
nnection with this case, including the completion of this forYesNo If yes, how much? \$ If yes, state the attorney's name, address, and telepho	orm?	for services in
YesNo If yes, how much? \$	ne number:	ttorney (such as
Yes No If yes, how much? \$  If yes, state the attorney's name, address, and telepho  12. Have you paid, or will you be paying, anyone operategal or a typist) any money for services in connection	ne number:	ttorney (such as
Yes No If yes, how much? \$	orm?  ne number:  other than an at with this case,	ttorney (such as

# FORM 6. Motion and Declaration for Leave to Proceed in Forma Pauperis (continued)

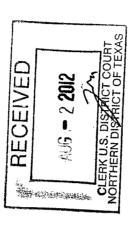
14 77					
case in this court?Yes\times_No If yes, state	eave to proceed in forma pauperis in any other				
100 <u></u> 100 11 yes, stat	e the name and docket number of that case.				
15. State the address of your legal residual	daina.				
	77 - KARNES A F.C.I.				
PARRY DEREK DEAIN 429731	77 - KARNES A F.C. I.				
Vour douting phone work w	RIVERS, Tx 7807				
Your daytime phone number: ( ) Your age: Your ye					
Your ye	ars of schooling: Graduated H.S.				
Von myst sign and date the hold of					
You must sign and date the declaration under per	nalty of perjury.				
DECLARATION UNDER 1	PENALTY OF PERJURY				
I declare under penalty of perjury, under the law	s of the United States, that my answers on this				
form are true and correct.					
7/25/12					
Date	Petitioner's/Appellant's Signature				
L	arry Derek Blain				
cc:					
ORDER OF THE COURT					
The motion to proceed in forma	The motion to proceed in forma pauperis				
pauperis is DENIED. The docketing fee must be paid within 14 days.	is GRANTED. Let the applicant proceed				
mot of paid within 17 days.	without prepayment of the docketing fee.				
Circuit Judge or Clerk Date	Circuit Judge or Clerk Date				

Larry Derek Blain #42973-177 K/A Federal Correctional Institution P.O. Box 4200 Three Rivers, Texas78071

THE STATES OF STATES OF THE ST

NO RELIBERATE PRINCE

LEGAL MAIL



Clerk, U.S. District Court 1100 Commerce St., Rm. 1452 Dallas, Texas 75242

NIIO TO TOTAL